

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000011330

Entity Name: SEPA CLUB INC.

Current Principal Place of Business:

5448 8 MILE RANCH ROAD
SAINT CLOUD, FL 34773

Current Mailing Address:

5448 8 MILE RANCH ROAD
SAINT CLOUD, FL 34773 US

FEI Number: 94-3490566

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TOLBERT, LAURA
633 E HILLCREST ST
ALTAMONTE SPRINGS, FL 32701 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: LAURA TOLBERT

03/07/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR, PRESIDENT
Name KUTZ, SYME
Address 3746 GATLIN PLACE CIR
City-State-Zip: ORLANDO FL 32812

Title DIRECTOR, VP/T
Name HEMPHILL, RITA E
Address 6020 CAMP CYPRESS ROAD
City-State-Zip: SAINT CLOUD FL 34773

Title DIRECTOR, SECRETARY
Name TOLBERT, LAURA
Address 633 E HILLCREST ST
City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title DIRECTOR
Name DACATO, MICHAEL
Address 317 KRUEGER STREET
City-State-Zip: ORLANDO FL 32839

Title DIRECTOR, KEY CHAIR
Name GARMANY, LINDA
Address 9450 CONCORD RD
City-State-Zip: ST CLOUD FL 34773

Title DIRECTOR, PAST PRESIDENT
Name SANDER, HUNTER
Address 816 WAVECREST DR
City-State-Zip: ORLANDO FL 32807

Title DIRECTOR
Name HOLZSCHUH, CURTIS
Address 5233 US HWY 98 N
#22
City-State-Zip: LAKELAND FL 33809

Title DIRECTOR
Name STONE, DON
Address 4221 SW ILIAD ST
City-State-Zip: PORT ST LUCIE FL 34953

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LAURA TOLBERT

SECRETARY

03/07/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name SAYRE, GREG
Address 4373 WYNDCLIFF CIRCLE
City-State-Zip: ORLANDO FL 32817

Title DIRECTOR
Name BAKER, SCOTT
Address 15118 N 24TH ST
City-State-Zip: LUTZ FL 33549

Title DIRECTOR
Name SMITH, LAURETTA L.
Address 5450 8 MILE RANCH RD
City-State-Zip: ST. CLOUD FL 34773